

Mew bourn

2rd flelf 2017

DCP Operating Company, LP

3026 4th Avenue

970-356-9700

Greeley, CO 80631

Semi-Annual NSPS Subpart OOOOa Report



January 23, 2018

U.S. Environmental Protection Agency (EPA) Region 8 Director, Air and Toxics 1595 Wynkoop Street Denver, CO 80202

RE: Semi-Annual VOC Monitoring Report - NSPS 0000a

Mewbourn Gas Processing Plant

Construction Permit 09WE1136 Issuance 4

Reporting Period: July 1, 2017 through December 31, 2017

Dear Sir/Madam,

On behalf of DCP Operating Company LP, I am submitting the Semi-Annual Report per 40 CFR Part 60 Subpart OOOOa for O'Connor Gas Plant, specifically for the process unit, located in Weld County. The start-date of the process unit was March 6, 2017.

Details of the facility (inclusive of facility address and mailing address) and contact information are given in the table below:

Name of Company		Facility Name	
DCP Operating Company, LP	Mewbou	urn Natural Gas Processin	g Plant
Facility Location: (Street)	County	State	Zip
18241 WCR 35	Weld	со	80651
Mailing Address (if different):	City	State	Zip
18295 WCR 35	Platteville	СО	80651
Contact Person	Phone	Emai	1
Patricia Grajeda de Babb	970.378.6385	pgrajedadebabb@dc	pmidstream.com

Table 1- Company and Facility Information

The required information contained in the regulation cited above includes the following:

1. 40 CFR 60.5422a(a) You must comply with the requirements of paragraphs (b) and (c) of this section in addition to the requirements of §60.487a(a), (b), (c)(2)(i) through (iv), and (c)(2)(vii) through (viii). You must submit semiannual reports to the EPA via the Compliance and Emissions Data Reporting Interface (CEDRI). (CEDRI can be accessed through the EPA's Central Data Exchange (CDX) (https://cdx.epa.gov/).) Use the appropriate electronic report in CEDRI for this subpart or an alternate electronic file

format consistent with the extensible markup language (XML) schema listed on the CEDRI Web site (https://www3.epa.gov/ttn/chief/cedri/). If the reporting form specific to this subpart is not available in CEDRI at the time that the report is due, submit the report to the Administrator at the appropriate address listed in §60.4. Once the form has been available in CEDRI for at least 90 days, you must begin submitting all subsequent reports via CEDRI. The report must be submitted by the deadline specified in this subpart, regardless of the method in which the report is submitted. This NSPS OOOOa semiannual report is being submitted via CEDRI. Attached for you review are the applicable CEDRI forms and associated Semiannual NSPS OOOOa Report.

Should you have questions regarding this report or require additional information, please contact Pete Stevenson at 303-605-2035 or pfstevenson@dcpmidstream.com.

Certification by responsible official

Based on the information and belief formed after reasonable inquiry, to the best of my knowledge I believe the statements and information in this document are true, accurate, and complete.

David M. Jost

Vice President, Northern Operations



1/23/2018 Date

cc: Air Pollution Control Division
Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
APCD-SS-B1
Denver, Colorado 80246-1530

Attachment A

40 CFR Part 60 - Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 - 60.5422a(a) Semiannual Report

	_	that the corresponding for FACI	LITY INFORMAT	ION							ADDITIONAL	INFORMATION
Facility Record No. " (Field value will automatically generate.)	Facility Name *	Address of Processing Plant*	Address 2	City *	County *	State Abbreviation*	Zip Code *	Responsible Agency Facility ID (State Facility Identifier)	Beginning Date of Reporting Period *	Ending Date of Reporting Period *	Please enter any additional information	Enter associated fi name reference.
	e.g.: ABC Company DCP Mewbourn Gas 1 Plant	THE RELEGION OF THE PROPERTY.	e.g.: Suite 100	e.g.: Brooklyn Platteville	e.g. Kings County Weld County	e.g.: NY CO	e.g.: 11221 80651		eg: 01/01/2016 07/01/2017	e g: 06/30/2016 12/31/2017		e.g.: filename.pdf Mewbourn NSPS 0000a July-Dec 2017.pdf

The asterisk (*) next to each field indicates that the corresponding field is required.

EQUIPMENT INFORMATION

Facility Record No. * (Select from dropdown list)	Month Identification* (Select from dropdown list)	Number of pressure relief devices for which leaks were detected * (§60.5422a(c)(1))	Number of pressure relief devices for which leaks were not repaired * (§60.5422a(c)(2))	which leaks were	Number of valves for which leaks were not repaired * (§60.487a(c)(2)(ii))	Number of pumps for which leaks were detected (560.487a(c)(2)(iii))	Number of pumps for which leaks were not repaired.* (§60.487a(c)(2)(iv))	Number of connectors for which leaks were detected * (560.487a(c)(2)(vii), 560.5422a(a))	Number of connectors f which leaks were not repaired * (§60.487a(c)(2)(viii), §60.5422a(a))
		e.g.: 5	e.g.: 5	e.g.: 5	e.g.: 5	e.g.: 5	e.g.: 5	e.g.: 5	e.g., 5
	July	0	0	0	0	0	0	0	0
	August	0	0	0	D	0	0	0	0
	September	0	0	0	0	0	0	0	0
	October	0	0	0	0	0	0	0	O.
	November	0	0	0	0	0	0	0	0
	December	0	0	0	0	0	0	0	0

Semiannual Report -NSPS 0000a

Site: DCP-MEWBOURNE

Unit: CONDENSATE PIPELINE

Reference #	Compressor	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
	All		No. of the last				
	Monitor Count	0	0	0	0	0	0
	Leak Count	0	0	0	0	0	0
	Leak Percent	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
-	Not Repaired in 15 Days	0	0	0	0	0	0
	Repair Delay New, Previous	0.0	0,0	0,0	0,0	0.0	0.0
Reference #	Connector	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
	All				1000		
	Monitor Count	0	0	0	0	0	0
	Leak Count	0	0	0	0	0	0
	Leak Percent	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	Not Repaired in 15 Days	0	0	0	0	0	0
	Repair Delay New, Previous	0,0	0,0	0,0	0,0	0,0	0,0
Reference #	Press Relief Device	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
	All			1		NAME OF TAXABLE PARTY.	
	Monitor Count	0	0	0	0	0	0
	Leak Count	0	0	0	0	0	0
	Leak Percent	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	Not Repaired in 15 Days	0	0	0	0	0	0
	Repair Delay New, Previous	0,0	0,0	0,0	0,0	0,0	0,0
Reference #	Pump	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
	AIF						
	Monitor Count	0	0	0	0	0	0
	Leak Count	0	0	0	0	.0	0
	Leak Percent	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	Not Repaired in 15 Days	0	0	0	0	0	0
	Repair Delay New, Previous	0,0	0,0	0,0	0,0	0,0	0,0
Reference #	Valve	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
	All					200	
	Monitor Count	0	0	13	0	0	13
	Leak Count	0	0	0	0	0	0
	Leak Percent	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	Not Repaired In 15 Days	0	0	0	0	0	0
-	Repair Delay New, Previous	0,0	0,0	0,0	0,0	0.0	0.0

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Repair Delay Report

From: 7/1/2017 To: 12/31/2017 DCP Operating Company, L.P. - Mewbourne NSPS 0000a

Unit:

Unit Repair Delay Count: 0

Facility Repair Delay Count: 0

Signature of Owner or Operator

Responsible for Delay of Repair Decision

This report was generated using a filter:

Unit is equal to CONDENSATE PIPELINE

Component Count Changes

DCP Operating Company, L.P. - Mewbourne

From: 7/1/2017, To: 12/31/2017, Rule: NSPS OOOOa

Unit: CONDENSATE PIPELINE

Component Type	Frequency	# of Beginning Tags	# of Tags Added	Total # of Tags	# of Tags Removed	# of Ending Tags
CONNECTOR	Annually	35	0	35	0	35
VALVE	Quarterly - 3rd Month	13	0	13	0	13
	Annually	1	0	1	0	1
	Total:	14	0	14	0	14
	Unit Total:	49	0	49	0	49
	Facility Total:	49	0	49	0	49

Monitor Frequency Counts

DCP Operating Company, L.P. - Mewbourne

NSPS OOOOa as of 12/31/2017, Follow-Ups Combined

Unit: CONDENSATE PIPELINE

Component Type	Frequency	Heavy Liquid	Light Liquid	Gas/Vapor	Other	Total
CONNECTOR	Annually	0	31	4	0	35
VALVE	Quarterly - 3rd Month	0	11	2	0	13
	Annually	0	1	0	0	1
	Total:	0	12	2	0	14
	Unit Total:	0	43	6	0	49
	Facility Total:	0	43	6	0	49

NDE Inspection Detail By Date

DCP Operating Company, L.P. - Mewbourne

From: 7/1/2017 To: 12/31/2017

Unit: Area: Equipment: Tag: Type: Date/Time: Rdng: Inspector: Instrument: Location:

Count For Day: 0

Count For Date Range: 0

CVS Inspection Detail By Date

DCP Operating Company, L.P. - Mewbourne

From: 7/1/2017 To: 12/31/2017

Unit: Area: Equipment: Tag: Type: Date/Time: Rdng: Inspector: Instrument: Location:

Count For Day: 0

Count For Date Range: 0



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							Bala	ance Co	mmer	ıts:								alance:
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Abbreviation Key: PL (1) or (2) = Previous Leaker M = Monthly Component Q = Quarterly Component A = Annual Component

NR= Not Required Component